



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Complete if Known

Application Number	09/508,510
Filing Date	May 26, 2000
First Named Inventor	Tschope at al.
Examiner Name	Mertz, Prerna Maria
Group Art Unit	1646
Total Number of Pages in This Submission	Attorney Docket Number 2923-495

ENCLOSURES (check all that apply)

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Request for Continued Examination (RCE) | <input type="checkbox"/> Assignment Papers | <input type="checkbox"/> After Allowance Communication to Group |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Third Preliminary | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input checked="" type="checkbox"/> Extension of Time Request (See RCE) | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address, and Statement Under 37 CFR §3.73(b) | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | Attachments to Amendment: |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | 1. Formulation, Characterization, and Stability of Protein Drugs- Michael F. Powell |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) | 2. Formulation, Characterizations, and Stability of Protein- Leo S. Lin et al. |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

REMARKS:

SUBMITTED BY		Complete (if applicable)			
NAME AND REG. NUMBER	Patrick T. Skacel, Reg. No. 47,948				
SIGNATURE		DATE	3/23/04	DEPOSIT ACCOUNT USER ID	02-2135